POLICE RADIO DISPATCHER APPLICATION PACKET INSTRUCTIONS

Thank you for you interest in the position of Police Radio Dispatcher with the City of Memphis. Listed below are instructions for completing the application packet and directives on where to return the packet. **Read and follow all instructions carefully**.

INSTRUCTIONS:

- 1. Read all information carefully and fill out all forms completely.
- 2. DO NOT QUIT YOUR JOB! THIS IS NOT A JOB OFFER.
- 3. Fill out the **Police Radio Dispatcher application form** completely.
- 4. Fill out the <u>High School Transcript Form</u> enclosed in the Memphis Police Department's Application Packet and carefully follow all instructions included on the document.
- 5. Completely fill out the <u>Memphis Police Department Personal History Statement</u> (enclosed in the Application Packet).
- 6. Completely fill out the <u>Authorization for Release of Personal Information</u> (enclosed in the Application Packet) **AND** have it **NOTARIZED**.

You must bring (in person) the completed Application Packet, Personal History Statement and the Authorization for Release of Personal Information **AND** you must also bring your original(or a certified copy) of your Birth Certificate, your original valid Driver's License, and your original Military DD214 papers, including the part listing the character of discharge (if applicable).

REPORT IN PERSON TO:

Place: Memphis Police Training Academy,

4371 O.K. Robertson Road

(off Hwy 51, near the intersection of Watkins Rd and Thomas St.,

toward Millington, TN.)

Dates: Between the dates of Wednesday, October 24, 2012 through Friday, November 9, 2012

(excluding Saturday and Sunday).

No applications will be accepted after Friday, November 9, 2012.

Time: Applicants may return applications in between the hours of 8:00 a.m. and 5:00 p.m.

Your application will be reviewed by a member of the MPD Employment Team (will last about 30 minutes to one hour).

BRING ORIGINAL I.D. WITH YOU.

IMPORTANT: 1. You must report as instructed and in person to return your application. You may not mail in your application.

2. You must have all documentation before reporting.

Any questions should be directed to the MPD Employment Team at (901)-357-1700.

POLICE RADIO DISPACHER SALARIES

	Hourly	Pay Period	Monthly	Annually
0-1 yrs	\$18.6313	\$1490.50	\$3,229.32	\$38,753.00
1-2 yrs	\$20.3673	\$1,629.38	\$3,530.21	\$42,363.88
2-3 yrs	\$22.1030	\$1,768.24	\$3,831.07	\$45,974.24
3 yrs +	\$23.9511	\$1,916.09	\$4,151.40	\$49,818.34

Note: 1 year probationary period.

EMPLOY YOUR INSTINCTS.

MEMPHIS POLICE RADIO DISPATCHER APPLICATION





www.memphistn.gov
MPDAcademy.com • 1-800-318-4164



A C Wharton, Jr. • Mayor of Memphis

Toney Armstrong • Director of Police



Memphis Police Department Police Radio Dispatcher Application Packet



MINIMUM REQUIREMENTS

- Must be at least eighteen (18) years of age
- Must be a citizen of the United States
- Must be a high school graduate or equivalent

This packet contains the following information

- High School transcript request form
- College transcript request form
- Personal History Statement
- Application for Employment Form

Read all information carefully and fill out all forms completely.

CONSEQUENCES OF FALSIFICATION

ANY misrepresentation, falsification or omissions given on ANY FORM herein is just cause for rejecting your application. It will also disqualify you from making application in the future for positions with the Memphis Police Department. I also understand that these statements may subject me to termination.

MEMPHIS POLICE DEPARTMENT PERSONAL HISTORY STATEMENT

PLEASE READ:

Answer each question on this form. Information must be HANDWRITTEN AND PRINTED IN BLACK INK (DO NOT TYPE). If additional information must be submitted in relationship to a specific question, please submit this information on additional sheets of 8 1/2" x 11" paper (NO SCRAP SHEETS) and attach them to this form. Precede each answer with the number and letter of the referenced section. DO NOT MISSTATE OR OMIT ANY FACTS, as all information is verified. ACCURACY IS ESSENTIAL. <a href="ANY FALSE STATEMENTS OR INFORMATION KNOWINGLY OMITTED IN THIS QUESTIONNAIRE IS JUST CAUSE FOR DENYING OR TERMINATING YOUR APPLICATION. There are to be no UNKNOWN or UNANSWERED questions when this form is completed and turned in. If a question or the information requested does not apply, indicate this by using the symbol N/A (not applicable). Should this questionnaire be UNSATISFACTORILY FILLED OUT, you will be rejected from further consideration.

When the Personal History Statement is turned in, the following support documents MUST ALSO BE TURNED IN:

- 1. Original Birth Certificate. We will retain a copy.
- 2. Copy of High School Diploma or GED certificate
- 3. Original valid Driver's License (for ID purposes only), plus a copy of valid Driver's License.
- 4. Your original Military DD214 (including character of discharge section), and any other discharge document(s), if applicable, for us to retain.
- 5. Active Reserves who currently attend Military Drills must submit a Military Letter of Good Standing. This letter can be obtained from a staff member upon receipt of your Application Packet. The applicant must submit all original DD214 discharge documents as soon as they become available to the applicant.
- 6. Applicants who have previously served in the Active Reserves MUST submit a copy of their discharge papers, showing character of discharge from the Reserve Unit.
- 7. High School transcript and College transcript

FAILURE TO TURN IN THESE DOCUMENTS WILL RESULT IN YOUR APPLICATION BEING REJECTED BY THE MEMPHIS POLICE DEPARTMENT.

I HEREBY CERTIFY THAT I HAVE READ AND UNDERSTAN	D ALL OF THE ABOVE STATED INFORMATION.
Signature:	Date:

This packet must be in **HANDWRITTEN IN BLACK INK (DO NOT TYPE).**

Please Print If this application packet is NOT LEGIBLE, it WILL NOT be accepted.

1. PERSONAL HISTORY				
Date:	Position Applied For:		·	
A				
Full Name (Last) (First) (Middle)	Sex/Race	Date o	f Birth
В		······································		
Current Street Address Apt#.	City		State	Zip Code
C				
Home Phone Cell Phone	Work Hours	Days Off	•	
D				
	oor or relative with whom you are in regula		be left for you.	
E. Are you a United States Cit	izen? ves No			
b. The you a onited builds on	12011.			
Social Security Number	Birthplace	City		State
F				
	names that you have ever used, including a			
Have you ever had your name	changed? YES NO) (If wes, provide documents	ation)	
	<u>-</u>	(,,),,,, p	,	
G. Marital Status Single M	larried Divorced Separated	Widowed		
H. Driver's License				
License Nu	mber	State Type/O	Class (Operator D, etc.)	
Expiration Date	Conditions (Correcti	ve Lens, etc.)		
• B41444444				
2. FAMILY HISTORY		•		
A .				
Full Name of Present Spouse	Maiden Name	Age		Date of Birth
В.				
Present Employment of Spouse	Address	City	State	Phone #
C				
Full Name of former Spouse(s)	Maiden Name	A oe	Date o	f Righ

3. RESIDENCE

A. Chronologically list all residences since your 18th birthday, regardless of the time you resided there beginning with your present address. If in military service, list dates, branch and duty stations, to include off base residences. List addresses while attending school if away from home. Note when living with parents by indicating with an asterisk(*).

FROM: MO./YR.	TO MO/YR.	COMPLETE ADDRESS	CITY/ STATE	ZIP
	AND MILLION CO.			

4. EDUCATION

SCHOOL NAME	LOCATION	DATES: FROM-TO	YEAR OF GRADUATION	CREDIT HOURS OR DEGREE
HIGH SCHOOL				
G.E.D.				
COLLEGE/ UNIVERSITY				
GRADUATE SCHOOL				
TRADE/BUSINESS OTHER SCHOOLS	·			

5. EMPLOYMENT TERMINATION

A. Have you ever been dismissed, fired or asked to resign from a held knowing that you would be fired or terminated if you did	
If yes, explain below:	
TERMINATIONS:	
COMPANY NAME:	
STREET ADDRESS:	
DATES OF EMPLOYMENT: FROM	TO
POSITION:SU	PERVISOR:
PHONE #:	
EXPLAIN IN DETAIL CIRCUMSTANCES OF TERMINATIO	N
(If needed, additional information may be s	
COMPANY NAME:	
STREET ADDRESS:	
DATES OF EMPLOYMENT: FROM	ТО
POSITION:SU	PERVISOR:
PHONE #:	
EXPLAIN IN DETAIL CIRCUMSTANCES OF TERMINATIO	

TERMINATION 1:
TERMINATION 2:

6. EMPLOYMENT A. MAY WE CONTACT YOUR CURRENT EMPLOYER? _____YES _____NO B. On the following four pages you will find employment sheets. Please list your entire employment history, including part-time, temporary, and seasonal regardless of time employed. Begin with your current employment or most recent job and work backwards. If unemployed, list dates of unemployment. It is very important that employment information is accurate and must cover from HIGH SCHOOL GRADUATION TO PRESENT. If additional employment sheets are needed, please make photocopies prior to filling out any forms. When completing the attached Employment Sheets please LIST ALL AREA CODES AND ZIP CODES. MAKE SURE THAT ALL ADDRESSES AND PHONE NUMBERS ARE COMPLETE AND CORRECT. EMPLOYMENT REFERENCE SHEET Name of Employer or Business: Street Address: City: _____ State: ____ Zip: Date of Employment: FROM: __/__ TO: __/___ Phone #: ________ Position:______ Work Duties: Reason for Leaving (explain in detail):

FOR INVES	STIGATIVE USE C	NLY
POSITIVENEGATIVEVERIFIED ON	VLYNOT VE	ERIFIED
PERSON INTERVIEWED:	***************************************	TITLE
EXACT DATES OF EMPLOYMENT: FROM:/	TO:	. / /
POSITION HELD:		ELIGIBLE FOR REHIRE: YESNO
ADDITIONAL COMMENTS:		
INVESTIGATOR:		DATE:

Name of E	Employer or Business:		
Street Add	lress:		
City:		State:	Zip:
Date of Er	mployment: FROM:/ TO:/_		
Phone #:	(Position	!; <u> </u>	
Work Duti	es:		
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	INVESTIGATOR:	DATE;	
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	POSITION HELD:		REHIRE: YESNO
	ADDITIONAL COMMENTS:		
	INVESTIGATOR:	DATE:	

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EXACT DATES OF EMPLOYMENT: FROM: / / TO: / /				
POSITION HELD: ELIGIBLE FOR REHIRE: YES NO				
ADDITIONAL COMMENTS:				
INVESTIGATOR: DATE:				

Name of	f Employer or Business:			
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	EXACT DATES OF EMPLOYMENT: FROM: / / TO:			
	POSITION HELD:	_ELIGIBLE FOR RE	CHIRE: YESNO	
	ADDITIONAL COMMENTS:			
, m 1	INVESTIGATOR:	DATE:		

7. VEHICLE INFORMATION

A. List all vehicles that you own and/or drive for personal use. (Include parents, or others with whom you reside.)

YEAR	MARE	MODEL	COLOR	AUTO TAG#	STATE	OWN/ BUYING

9. MILITARY DECORD						
8. MILITARY RECORD						
A. Have you ever been on active duty in the Armed Forces of the United States?YESNO						
If yes:						
B. Branch of Military Service						
C. Type of Discharge						
D. Dates of Active Duty (Month, Day and Year) FROM						
E. Are you a member of a Reserve Unit?YESNO or Nation	nal Guard UnitYESNO					
If yes, Branch Ready	Standby/RR					
F. Are you currently active in the military?YESNO						
If yes, what is your anticipated release date?	***************************************					
G. If you were in the military, were you ever court-martialed?YES	NO					
If yes, explain:						

Did you ever have any Article 15 and Captain'		•		while in the milita	ary? (This includes an
If yes, explain:					
		ann airth reach feanaigh th' airth air			
9. COURT RECORD					
A. Have you ever been transported to a jail/o crime means issued a warrant, or indicted ! B. List ALL times you detailed explanation arrests or charges ever expunged. An indep arrest or charge (s) a untruthfulness.	detention facility a misdemeanor country by a grand jury)? have been either of the circumstanten if the charge (endent investigat	or charged itation, a judy YES arrested or name for each (s) was dishiption of your	d with a crime as avenile summons, SNO charged with a cach event listed (usinissed, did not restrained history	an adult or a juver an adult summon riminal offense. se attached sheets) sult in a conviction will be conducted	Please include a . You must list ALL or the charge (s) was and, if either an
DATE	CITY/STATE		CHARGES	CIRCUMSTAN	DISPOSITION OF CASE
C. Has your driver's lice If yes, please explain:_		-		-	NO

Have you ever held a D	river's License(s) in any	other state?	YESNO		
If yes, which state(s), list license number if known:					
TRAFFIC TICKETS:					
DATE	CITY/STAT	TE .	CHARGES	DISPOSITION OF CASE	

	Property of Medical Control of M	If yes, explain:	, including the Mem	nphis Police Department.	
	have you ever been an e YESNO If yes er or not you were a per	, list what agency, d	ates of employment	and position,	
	ther law enforcement ag and position held, and	ency?YES	NO If yes, l	ist what agency,	

Company Name	Address	Phone	Date of Commission
AGENCY	DATE	POSITION	RESULT
-			
			-
ve you ever submitted to a p	oolygraph test?YES _	NO If yes, explain:	
a vou presently involved or	do you have knowledge that	you might become involve	ed in any criminal or c
• •		you might become involve	· ·

11. REFERENCES

A. Give three (3) references who are responsible adults of reputable standing in their community that you HAVE KNOWN WELL FOR AT LEAST THREE YEARS AND THAT KNOW YOU. References CANNOT be relatives, former employers or present employers. You MUST include their full names, COMPLETE home address and business address (include city, state, zip code), and correct home or business telephone numbers (including area code), where they may be contacted during normal business hours:

1.							
	Full Name (Last) (First) (Middle)				Yo	ears Known	
					St.	7'. 0.4.	
	Current Street Address Apt#.			City	State	Zip Code	
	Business Address			City	State	Zip Code	
. ()	()				
······································	Home Phone	Work Phone			Contact Time and Location	on	
2.							
<i>L</i>	Full Name (Last) (First) (Middle)				Ye	ears Known	
	Current Street Address Apt#.			City	State	Zip Code	
	Business Address			City	State	Zip Code	
(()				
	Home Phone	Work Phone			Contact Time and Locati	on	
3.							
***************************************	Full Name (Last) (First) (Middle)	1			Ye	ears Known	
	Current Street Address Apt#.			City	State	Zip Code	
	Business Address			City	State	Zip Code	
()	()				
	Home Phone	Work Phone			Contact Time and Locati	on	

I hereby certify that ALL statements made on this application are TRUE and CORRECT to the best of my knowledge. I hereby further certify this application contains no misrepresentations, falsifications or omissions. I further acknowledge that should any investigation (both pre and post employment) at anytime reveal or disclose any such misrepresentations, falsifications, or omission, my application will be rejected and my name may be removed from the employment list. I cannot reapply with the Memphis Police Department because of such false and misleading statements. I also understand that these statements may subject me to termination.

DO NOT WRITE BELOW THIS DOUBLE LINE

FOR ACADEMY USE ONLY RIGHT THUMB

MEMPHIS POLICE DEPARTMENT APPLICANT INVESTIGATION SQUAD AUTHORIZATION FOR RELEASE OF PERSONAL INFORMATION

I,			
The intent of this authorization is to give my of educational institutions; medical and psycl private practitioners, and the U.S. Veteran's A complaints or grievances filed by or against r of other counsel, whether representing me or which I presently have, or have had an intere or criminal records or information from a law	hiatric treatment and/or const dministration; employment ne and the records and recol another person in any case, st. This waiver also gives au	ultation, including hos and pre-employment re lections of attorneys at whether criminal or civ	pitals, clinics, ecords; law or vil, in
I understand that any information obtained by developed directly or indirectly, in whole or in determining my suitability for employment any person(s) who may furnish such information; and I do hereby release said incurred as a result of furnishing such information.	n part, upon this release auth t by the City of Memphis Po tion concerning me shall not person(s) from any and all	norization, will be consolice Department. I also be held accountable for	idered certify that
A copy of this release form will be valid as a does not contain an original writing of my sig		gh the said photocopy	
before	n <u>MUST</u> BE NOTARIZED byour application will be according to the signed in FRONT (epted.	
Signature (include maiden name)			
Address	City	State	Zip
Phone	Date of Birth	Social Security Nur	nber
Sworn to and Subscribed before me this	day of	, 2	20·
State of Co	unty of		
		ission Expires:	
	wry commi	ission Expires.	

NOTARY

HIGH SCHOOL TRANSCRIPT FORM

INSTRUCTIONS TO APPLICANT:

- 1. Please read carefully and completely, fill out the following requested information.
- 2. Take or mail this form to the High School that you graduated from. If you received your G.E.D. you may want to call first to see where your G.E.D. records are located. If the High School/Board of Education charges a fee for mailing your transcript to us, YOU ARE RESPONSIBLE FOR PAYING THE FEE.
- 3. Please have the High School/Board of Education <u>mail</u> your transcript or G.E.D. scores directly to the Memphis Police Department at the address listed below.
- 4. When the Memphis Police Department receives your transcript, it becomes the property of the City of Memphis and cannot be released to any other person or agency. It is your responsibility to contact the Employment Team to make sure they have received your transcript(s) by the stated deadline.

NOTE: ALL TRANSCRIPTS/G.E.D. SCORES MUST BE RECEIVED AT THE MEMPHIS POLICE EMPLOYMENT TEAM BY MAIL FROM YOUR HIGH SCHOOL/BOARD OF EDUCATION. TRANSCRIPTS DELIVERED IN PERSON OR MAILED BY YOU WILL NOT BE ACCEPTED.

Detach the form provided below and mail to the High School that maintains your permanent transcript.

JAME OF HIGH SCHOOL:						
TO WHOM IT MAY CONCERN: I have applied for I am requesting that you mail along with this form, a my graduation date) or my G.E.D. scores to the Mem	copy of my official high school transcript (showing phis Police Department at the following address:					
•	lice Training Academy					
	K. Robertson Road					
Memp	phis, TN 38127					
My name is (Last, First, Middle):						
My name at the time I attended your school was (Las	My name at the time I attended your school was (Last, First, Middle):					
My complete mailing address is (include city, state an	nd zip code):					
My home phone number:	My work phone number:					
My date of birth:	My Social Security number:					
graduated on: Class of:	I received my G.E.D. on:					
LINDERSTAND THAT I WILL BE RESPONSIBLE FOR	ANV FEE INCLIBED AS PART OF THIS REQUEST					

PLEASE RETURN THIS FORM WITH TRANSCRIPT

Date:

Signature:

COLLEGE TRANSCRIPT REQUEST FORM

INSTRUCTIONS TO APPLICANT:

- 1. Please read carefully and completely, fill out the following requested information.
- 2. Take or mail this form to <u>ALL</u> Colleges/Universities that you have attended. A transcript must be received from each college attended. If the College/University charges a fee for mailing your transcript to us, <u>YOU ARE RESPONSIBLE FOR PAYING THE FEE</u>.
- 3. Have <u>each</u> College/University <u>mail</u> your transcript directly to the Memphis Police Department at the address listed below. It is your responsibility to contact the Employment Team to make sure it has received your transcript(s) by the stated deadline.
- 4. When the Memphis Police Department receives your transcript, it becomes the property of the City of Memphis and cannot be released to any other person or agency.

NOTE: ALL TRANSCRIPTS MUST BE RECEIVED AT THE MEMPHIS POLICE EMPLOYMENT TEAM OFFICE BY MAIL FROM THE COLLEGE/UNIVERSITY. TRANSCRIPTS DELIVERED IN PERSON OR MAILED BY YOU WILL NOT BE ACCEPTED.

Detach the form provided below and mail to the College or University that maintains your permanent transcript.

NAME OF COLLEGE OR UNIVERSITY:

TO WHOM IT MAY CONCERN: I have applied for a position with the Memphis Police Department. I am requesting that you mail a copy of my official school transcript to the Memphis Police Department at the following address:

Memphis Police Training Academy 4371 O. K. Robertson Road Memphis, TN 38127

My name is (Last, First, Middle):					
My name at the time I attended your school was (Last, First, Middle):					
My complete mailing addr	ess is (include city,	state and zip code):			
My home phone number:_	My home phone number: My work phone number:				
My date of birth:		My Social Security number:			
I attended from:	To:	Degree obtained:	Date:		
I UNDERSTAND THAT I WILL BE RESPONSIBLE FOR ANY FEE INCURRED BY MAKING THIS REQUEST.					
Signature: Date:					